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CONFIRMATION NO. 4632

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| SERIAL NUMBER<br>10/722,368 | FILING DATE<br>11/24/2003<br><br>RULE | CLASS<br>424 | GROUP ART UNIT<br>1655 | ATTORNEY DOCKET NO.<br>3790-66390-01 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

John C. Hegenauer, Danville, CA;  
 Haruna Yamaguchi, Castro Valley, CA;  
 Winnie Wai-Yi Chan, Alamo, CA; Elaine L. Bagwell, Dublin, CA;  
 Cindy Latham, Moraga, CA;  
 Jeffrey M. Avila, Miami Beach, FL;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/428,993 11/22/2002

*SL*  
 \*\* FOREIGN APPLICATIONS \*\*\*\*\* *None*

*SL*  
 IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 02/25/2004

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>SL</i><br>Examiner's Signature _____ Initials _____ | STATE OR<br>COUNTRY<br>CA | SHEETS<br>DRAWING<br>0 | TOTAL<br>CLAIMS<br>88 | INDEPENDENT<br>CLAIMS<br>4 |
|---|---------------------------|------------------------|-----------------------|----------------------------|

ADDRESS  
 24197  
 KLARQUIST SPARKMAN, LLP  
 121 SW SALMON STREET  
 SUITE 1600  
 PORTLAND , OR  
 97204

TITLE  
 Compositions, methods, and kits for weight loss and inhibiting the loss of lean body mass

|                                    |   |  |
|------------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>2210 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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